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07/01/2004

Melvin K. Silverman 500 WEST CYPRESS CREEK ROAD SUITE 500 Fort Lauderdale, FL 33308



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Melvin K. Silverman	(Depositor's name)
Ma ach	(Signature)
9.21.04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/039,555	01/08/2002	Frank G.	D'Andrea JR.	1303.01	1323
TITLE OF INVENTION: C	COMPUTER EXPANSION	SLOT COVER BASED ILLU	MINATION DEVICE		
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE

nonprovisional	YES	\$665		\$300		965	10/01/2004
EXAM	MINER	ART UN	IT	CLASS-SUBCLASS]		
NEGRON, ISMAEL		2875		362-371000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		names of agents Ol firm (hav agent) an	inting on the patent front page, you to 3 registered patent at R, alternatively, (2) the name ing as a member a registered d the names of up to 2 registor agents. If no name is listed inted.	ttorneys or of a single attorney or ered patent	Melvin 2 Yi Li 3	K. Silverman	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee categories	gory or categories (will not	be printed on the patent);	individual	□ corporation or other private group entity	government
4a. The following fee(s) are enclosed:		4b. Payment of Fee(s):	· ·		
🖾 Issue Fee		A check in the amo	unt of the fee(s)	is enclosed.	
✓ Publication Fee	4	☐ Payment by credit card. Form PTO-2038 is attached.			
☐ Advance Order - # of Copies		☐ The Director is hereby authorized by charge the required fee(s), or credit any overpaym Deposit Account Number (enclose an extra copy of this form).			
Director for Detents is requested to apply the	he Issue Fee and Dublicatio	n Fac (if any) or to so annly	ony previously	anid issue fee to the application identified above	20

(A	authorized Signature)	(Date)	
_	WHALK.	9.21.04	
. 1	NOTE; The Issue Fee and Publication Fee (if requested than the applicant; a registered attorney or	uired) will not be accepted from anyon	e
	nterest as shown by the records of the United States		11

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10/05/2004 MBELETE2 00000009 10039555

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